IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kirk Johnson

Application No.: 09/824,527   Group: 2146

Filed: April 2, 2001   Examiner: Joseph E. Avellino

Confirmation No.: 1065

For: Method and Apparatus for a Minimalist Approach to Implementing Server
Selection

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

☐   Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by
a Small Entity Statement previously submitted.

☐   A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is
enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
					RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	80	MINUS	* 80		X $ 26	$		X $52	$
INDEP	7	MINUS	** 9		X $110	$		X $220	$
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ $195	$		+ $390	$

                         * not fewer than 20
                         ** not fewer than 3   TOTAL = $ 0   TOTAL = $ 0

The Application Size Fee has been calculated as shown below:
(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to
			Rate	Total Amount Owed	Rate	Total Amount Owed	
			X $135	$[ ]	X $270	$[ ]	[ ] Sheets

Petition for Extension of Time

☐   Applicant hereby petitions to extend the time to respond to the [ ] dated [ ] for [ ] month(s) from [ ] to [ ]. The appropriate fee is set forth below.

☐   *[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]*

Please charge Deposit Account No. 08-0380 for the following fees:

☐   Petition for [   ] month Extension of Time $ _____

☐   Claims Fee $ _____

☐   Application Size Fee $ _____

☐   Other Fees:

     $ _____

     $ _____

TOTAL: $ _____

A check is enclosed in payment of the following fees:

☐   Petition for [   ] month Extension of Time $ _____

☐   Claims Fee $ _____

☐   Application Size Fee $ _____

☐   Other Fees:

     $ _____

     $ _____

TOTAL: $ _____

☒   Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

           Respectfully submitted,

           HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

           By__/Mark B. Solomon, Reg. No. 44348/_____
           Mark B. Solomon
           Registration No.: 44,348
           Telephone (978) 341-0036
           Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133
Dated: 10/14/08